

## **Speech-Language Pathology and Audiology Board**

1422 Howe Avenue, Suite 3, Sacramento, CA 95825 Telephone: (916) 263-2666 / Fax: (916) 263-2668 www.slpab.ca.gov



## REGISTRATION OF SPEECH-LANGUAGE PATHOLOGY OR AUDIOLOGY AIDE

Please refer to Article 5 of the Regulations

Name of licensed speech	-language pathologist or audio	ologist who will be supervis	sing the aide:	
LAST	FIRST		MIDDLE LIC	ENSE NUMBER
NAME OF BUSINESS				
BUSINESS STREET ADDRESS				
CITY	STATE	ZIP CODE	BUSINESS PHONE	E NUMBER
Names of other aides currently	y registered:			
		-		
2. Name of aide				
LAST	FIRST	MIDDLE	BEGINNING DATE OF	EMPLOYMENT AS AIDE
HOME ADDRESS			HOME PHONE NUMBER	
CITY		STATE	ZIP CODE	
SOCIAL SECURITY NUMBER			DATE OF BIRTH	
<ul> <li>(b) Have legal responsibilicompliance with the provision</li> <li>(c) Be physically present board has approved an all for alternative supervision with threshold audiograms when histories and the audiograms (d) Evaluate, treat, manage (e) Appropriately train the treatment. A supervisor singular accordance with Section 13 supervisor.</li> <li>(f) Define the services where exceed the competency of treatment beyond the plane</li> <li>WE HEREBY CERTIFY UNIT</li> </ul>	y for the health, safety and we ty for the acts and services on of the Act and these regulat t while the speech-language ternative plan of supervision with the registration form. An in performing outside the physis and make any necessary reseand determine the future dispeech-language pathology of hall establish and complete a 99.154.4 which is unique to the the aide as determined by the stablished by the supervisor for DER PENALTY OF PERJUR	elfare of the patients. provided by the speech-lations.  e pathology or audiolog  n. A supervisor of industri- industrial audiology aide in sical presence of a superferrals for evaluation and to position of patients.  In audiology aide to perform  In a training program for specific duties of the aide and the speech-language patholomis or her education, train  or the patient.  RY UNDER THE LAWS	y aide is assisting with all audiology aides shall income any only be authorized to divisor. The supervisor shareatment.  In duties to effectively assistench-language pathology are setting in which he or shall gy or audiology aide. The hing and experience, and	patients, unless the clude a proposed plan conduct air conduction all review all patients' at in evaluation and/or or audiology aides in the will be assisting the ese services shall not shall not include any
STATEMENTS MADE HEREI FACTS MAY BE CAUSE FOR				
SIGNATURE OF SUPERVISOR	R (IN BLUE INK) DATE	SIG	NATURE OF AIDE (IN BLUE INK)	DATE

aud	iology. Be specific.
Α.	1.
	2.
	3.
eve sum	each duty listed in "A" above, describe in detail the supervisor's training methods, the necessary minimum competency el of the aide, the manner in which the aide's competency will be assessed, the persons responsible for the training, a mary of any past education, training and experience the aide may have already undertaken, the length of the training gram, and assessment of the aides, competency level. Include a copy of any training manuals to be used.
3.	1.
	2.
	3.
	INFORMATION COLLECTION AND ACCESS
Sect man prov	Speech-Language Pathology and Audiology Board's Executive Officer is the person who is responsible for information maintenance. tion 2532 of the Business and Professions Code is the authority, which authorizes the maintenance of the information. All information is datory. Failure to provide any mandatory information will result in the application being rejected as incomplete. The information idded will be used to determine qualification for licensure. Each individual has the right to review his or her file maintained by the agency sect to the provisions of the California Public Records Act

List all duties the aide will perform in assisting the supervisor/licensee in the practice of speech-language pathology or

## SOCIAL SECURITY DISCLOSURE NOTICE

Disclosure of your Social Security Number (SSN) is mandatory. Section 30 of the Business and Professions Code and Public Law 94-455 (42 USCA 405 (c) (2) C)) authorize collection of your SSN. Your SSN will be used exclusively for tax enforcement purposes, for purposes of compliance with any judgment or order for family support in accordance with Section 11350.6 of the Welfare and Institutions Code, or for verification of licensure or examination status by a licensing or examination entity which utilizes a national examination and where licensure is reciprocal with the requesting state. If you fail to disclose your SSN, you will be reported to the Franchise Tax Board, which may assess a \$100 penalty against you.